

**In re U.S. Patent Application of**

**Serial Number: 09/910,862**

**Filed: July 24, 2001**

**For: LIQUID CRYSTAL DISPLAY DEVICE**

**Attorney Docket No. HITA.0090**

**Art Unit 2674**

**Examiner**  
**Lesperance, Jean E.**

**Honorable Assistant Commissioner for Patents**  
**Washington, D.C. 20231**

## COVER LETTER

Sir:

[ x ] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS PAID	RATE	CALCULATION
Total Claims	23	23	(Over 20)	x \$50	0
Independent Claims	3	3	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)			PAID	+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED					
			TOTAL		0.00

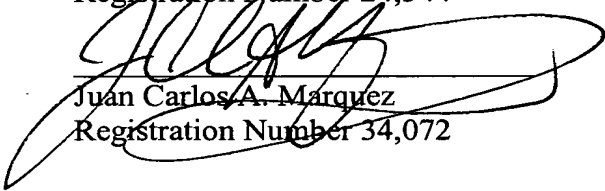
In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> [ x ] | Response to Office Action<br>(with claim amendments) | <input checked="" type="checkbox"/> [ x ] | Petition for 3 months Extension-of-Time |
| <input type="checkbox"/> [ ]              | Substitute Abstract                                  | <input type="checkbox"/> [ ]              | Terminal Disclaimer                     |
| <input type="checkbox"/> [ ]              | Preliminary Amendment                                | <input type="checkbox"/> [ ]              | Sequence Listing Statement              |
| <input type="checkbox"/> [ ]              | Other  | <input type="checkbox"/> [ ]              | Sequence Listing                        |
|   |  | <input type="checkbox"/> [ ]              | Sequence Listing Diskette               |

- [ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.
- [ x ] A check in the amount of **\$1,020.00** to cover the 3-month Extension-of-Time fee is enclosed.
- [ x ] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

\_\_\_\_\_  
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**June 20, 2005**